

[If you need additional space for ANY section, please attach an additional sheet and reference that section.]

FILED
12/3/2020

THOMAS G. BRUTON
CLERK, U.S. DISTRICT COURT

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF ILLINOIS

RECEIVED

SEP 22 2020 *JH*

THOMAS G. BRUTON
CLERK, U.S. DISTRICT COURT

GABRIEL ROJAS

(Enter above the full name
of the plaintiff or plaintiffs in
this action)

1:20-cv-05640
Judge Steven C. Seeger
Magistrate Judge Susan E. Cox
PC 2

vs.

Case No: _____
(To be supplied by the Clerk of this Court)

OFFICER "DROZCO"

OFFICER "HIDALGO"

SARGENT "Gumble"

(Enter above the full name of ALL
defendants in this action. Do not
use "et al.")

CHECK ONE ONLY:

☒ **COMPLAINT UNDER THE CIVIL RIGHTS ACT, TITLE 42 SECTION 1983**
U.S. Code (state, county, or municipal defendants)

☐ **COMPLAINT UNDER THE CONSTITUTION ("BIVENS" ACTION), TITLE**
28 SECTION 1331 U.S. Code (federal defendants)

☐ **OTHER** (cite statute, if known)

BEFORE FILLING OUT THIS COMPLAINT, PLEASE REFER TO "INSTRUCTIONS FOR FILING." FOLLOW THESE INSTRUCTIONS CAREFULLY.

[If you need additional space for ANY section, please attach an additional sheet and reference that section.]

I. Plaintiff(s):

- A. Name: GABRIEL ROJAS
- B. List all aliases: NONE
- C. Prisoner identification number: M47240 / I.D.O.C # 20190813216
- D. Place of present confinement: ILLINOIS DEPARTMENT OF CORRECTIONS
- E. Address: 2600 S. CALIFORNIA AVE., CHICAGO, IL., 60608

(If there is more than one plaintiff, then each plaintiff must list his or her name, aliases, I.D. number, place of confinement, and current address according to the above format on a separate sheet of paper.)

II. Defendant(s):

(In A below, place the full name of the first defendant in the first blank, his or her official position in the second blank, and his or her place of employment in the third blank. Space for two additional defendants is provided in B and C.)

- A. Defendant: OFFICER "ORTIZ"
 Title: CORRECTIONAL OFFICER
 Place of Employment: 2600 S. CALIFORNIA AVE., CHICAGO, IL., 60608
- B. Defendant: OFFICER "HIDALGO"
 Title: CORRECTIONAL OFFICER
 Place of Employment: 2600 S. CALIFORNIA AVE., CHICAGO, IL., 60608
- C. Defendant: Sargent "Gumble"
 Title: Sargent / OFFICER
 Place of Employment: 2600 S. CALIFORNIA AVE., CHICAGO, IL., 60608

(If you have more than three defendants, then all additional defendants must be listed according to the above format on a separate sheet of paper.)

[If you need additional space for ANY section, please attach an additional sheet and reference that section.]

III. List ALL lawsuits you (and your co-plaintiffs, if any) have filed in any state or federal court in the United States:

- A. Name of case and docket number: NONE
- B. Approximate date of filing lawsuit: NONE
- C. List all plaintiffs (if you had co-plaintiffs), including any aliases: NONE
- D. List all defendants: NONE
- E. Court in which the lawsuit was filed (if federal court, name the district; if state court, name the county): NONE
- F. Name of judge to whom case was assigned: NONE
- G. Basic claim made: NONE
- H. Disposition of this case (for example: Was the case dismissed? Was it appealed? Is it still pending?): NONE
- I. Approximate date of disposition: NONE

IF YOU HAVE FILED MORE THAN ONE LAWSUIT, THEN YOU MUST DESCRIBE THE ADDITIONAL LAWSUITS ON ANOTHER PIECE OF PAPER, USING THIS SAME FORMAT. REGARDLESS OF HOW MANY CASES YOU HAVE PREVIOUSLY FILED, YOU WILL NOT BE EXCUSED FROM FILLING OUT THIS SECTION COMPLETELY, AND FAILURE TO DO SO MAY RESULT IN DISMISSAL OF YOUR CASE. CO-PLAINTIFFS MUST ALSO LIST ALL CASES THEY HAVE FILED.

IV. Statement of Claim:

State here as briefly as possible the facts of your case. Describe how each defendant is involved, including names, dates, and places. **Do not give any legal arguments or cite any cases or statutes.** If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

It was May 16th, 2020, it happened in division 6, tier 2-A. I and other inmates had been transferred from Division 16 (Boot camp dorms) and placed there on that tier. So after being transferred and being placed on that tier I went 3 days without taking my prescribe SEIZURE and ANXIETY medications and every OFFICER AND MEDICAL STAFF PERSON couldn't give me an answer why I haven't. The OFFICERS AND MEDICAL STAFF advised me from day one to put in medical request forms which I complied and did several times and no response. On the fourth day being there on division 6, tier 2-A I wanted to speak with someone who could help me in order to receive my medication, medication had just left the tier without giving me my meds again and not able to provide any information on why either. It was 6:30pm time to lock-up for the top deck where I was on the last cell to the right when entering the tier. I refused to lock-up in order to speak with someone preferably a SARGENT so I could go to Cermack

Clinic and see about getting medicated, it had been 3 days going on 4 since I had recieved any that I was at risk of getting a seizure attack or anxiety attack. So the sargent is made aware of my request and is called to come speak with me. Sargent "Gumble" was escorted by two officers, officer "OROZCO" and officer "Hidalgo", all 3 of them had just come off another tier attending to a 10/10 call so once sargent Gumble walks on the tier she demands for me to lock-up. I replied by asking if she even knew why I asked to speak with her, all she said was "Yes, something about medication go lock-up!" So I asked sargent if I was going to get my meds and when? She replied and said "Yeah I'll get your meds go lock-up!" So I said "I hope so because I really need my meds". So I comply and start walking up to my cell and when were going up the stairs sargent "Gumble" pops out her can of mace and starts to shake it. I asked her "why did she do that if her plans were to mace me?" Officer "OROZCO" starts getting aggressive and try's to twist my wrist around for no reason and officer "Hidalgo" starts pushing me. I made them aware that there was no reason for that that I was complying. So halfway to my cell officers still proceeded with pushing me

(ADDITIONAL
SHEET)

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so when I turned around to ask them what was their problem, that I was compling OFFICERS START lunging at me trying to strike me which they did several times. I had put my hands up and started walking backwards toward my cell with my hands open in front of me and asking them what was their problem. Once I was by my cell my back hit the wall and when I decided to look back OFFICER "OROZCO" and "HIDALGO" lunge at me, punching me several times in the face and back of my head and threw me on the floor. After I was detained by OFFICERS SARGENT "Gumble" asked officer "OROZCO" to move aside and decided to mace me for no reason. I'm recovering from the covid-19 virus which I obtained while in custody at I.D.O.C and knowing that the mace could affect and cause respiratory problems the sargent knew I was detained already but decides to mace me putting me at high risk of obtaining respiratory problems. But also she maced me being less than 1 foot away. Once cameras are reviewed which have been by Internal Affairs and was also made aware that the camera Footage does not show me ever placing my hands on an officer or staff, also none of the officers ever recieved medical treatment or press any charges. I was given an orange I.D. meaning I'm a threat to staff and officers for something I did not do and served 28 days in segregation, sorry justice has to be served and I need to get recompensed.

Sincerely,
GABRIEL ROJAS

[If you need additional space for ANY section, please attach an additional sheet and reference that section.]

V. Relief:

State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

I want to get recompensed with at least \$150,000 thousand dollars.

VI. The plaintiff demands that the case be tried by a jury.



YES



NO

CERTIFICATION

By signing this Complaint, I certify that the facts stated in this Complaint are true to the best of my knowledge, information and belief. I understand that if this certification is not correct, I may be subject to sanctions by the Court.

Signed this 09 day of 14, 20 20

Gabriel Rojas

(Signature of plaintiff or plaintiffs)

GABRIEL ROJAS

(Print name)

I.D. # 20190813216

(I.D. Number)

2135 S. LAWNDALE AVE.

CHICAGO, IL., 60608-23

(Address)

GABRIEL ROJAS
#20190813216
P.O. BOX 089002
CHICAGO, IL., 60608
DIV.10, 1-D



1:20-cv-05640
Judge Steven C. Seeger
Magistrate Judge Susan E. Cox
PC 2

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PRISONER Correspondent
United States District Court
219 S. DEARBORN STREET, 20th FL.
CHICAGO, IL., 60604